Center

SPECIAL DIET STATEMENT

(Colorado Department of Public Health and Environment, Child and Adult Care Food Program)

Nutrition is an important part of good health and a good childcare program. Children need well-balanced meals to meet their daily energy needs and help build strong bodies and minds. Through the Child and Adult Care Food Program (CACFP), you can be assured that your child is getting balanced nutritious meals. All of the meals claimed must follow patterns set by the U.S. Department of Agriculture. As participants in the CACFP, your child care center can claim a maximum of one meal and two snacks or two meals and one snack daily per child unless they are approved to claim a fourth meal. Your childcare center receives a reimbursement for claiming these meals as well as information on nutritious meals for children.

If your child is unable to consume the foods that are required in the meal pattern, then substitutions may be made if authorized by a recognized medical authority. See reverse side of this page.

Below are the minimum Child and Adult Care Food Program meal requirements for children 1 through 12 years old:		
BREAKFAST		EXAMPLE
1) 2) 3)	Fluid milk Fruit, vegetable or juice Bread/bread alternate	MilkSliced applesCorn flakes
LUNCH/SUPPER		EXAMPLE
1) 2) 3a) 3b) 4)	Fluid milk Meat/meat alternate Fruit, vegetable or juice Fruit or vegetable Bread/bread alternate	MilkChickenGreen beansSliced peachesDinner roll
SNACK - Serve 2 of the following 4 foods:		EXAMPLE
1) 2) 3) 4)	Fluid milk Meat/meat alternate Fruit, vegetable or juice Bread/bread alternate	Pineapple juiceWheat Crackers

USDA forbids discrimination because of race, color, national origin, age, sex, or disability. Any person who believes he or she has been discriminated against in any USDA-related activity should write immediately to the Secretary of Agriculture, Washington, D.C. 20250.

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The child listed below participates in the USDA Child and Adult Care Food Program. Through this program, licensed childcare centers serve meals that meet the

USDA meal pattern requirements (see reverse side of this form). Substitutions in the regular meal pattern may be made based on the authorization of a recognized medical authority, i.e., Physician, Physician's Assistant, Nurse/Practitioner, Child Health Associate or Registered Dietitian. Child's Name: _____ Age: ____ Date*: _____ Child Care Center: _____ Substitution Effective Through*: ____ Reason for Substitution: _____ Substitutions are needed for the following food group **Key Nutrients that need to be** (Please Check All That Apply) **Specific Foods to Avoid Specific Food Substitutions Provided by Substitution** Iron Fortified Infant Formula Iron, Calcium, Zinc, Protein, Calories Calcium, Protein Fluid Milk Meat/Cheese/Eggs Protein, Iron, B₁₂ Vitamin A, C, Fiber Fruits Vitamin A, C, Fiber Vegetables Bread/Grains B-complex, Fiber Others - please specify Signature of Medical Authority: Parent's Signature: Please Print or Type Please Print or Type Name: Name: Address: ____ Address: _____ Phone: Phone: _____

This form must be updated every 6 months.

Follow Up Letter if Special Diet Statement Needs Clarification

Dear Medical Authority:
We have recently received a Special Diet Statement for
The Diet Statement indicates
should be substituted for
This substitution may not provide the child with sufficient
Unless you let me know of a change in the Special Diet Statement, I will assume that you are monitoring the child's nutritional status and making the necessary dietary additions.
Sincerely,
cc:
Parent